Texas Ethics Commission

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

5307

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction G	CUIDE explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers) 00051821	2 Total pages this report:					
a campinate/	TITLE FIRST	, MI	OFFICE USE ONEY					
3 CANDIDATE / OFFICEHOLDER		•••						
NAME	Hon. Brenda		Date Received					
	NICKNAME LAST	SUFFIX						
	Kennedy		The control of the co					
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP CODE	न १ एक १ १४					
OFFICEHOLDER	, , , , , , , , , , , , , , , , , , , ,	,						
ADDRESS	P.O. Box 90224		Date Hand-delivered or Date Perimarked					
Change of Address	Austin TX 78709		Date Hand-delivered of Date Permarked					
5 CAMPAIGN	TITLE FIRST	MI						
TREASURER NAME	Bruce		Receipt # Amount					
	NICKNAME LAST	SUFFIX	Date Processed					
	Todd		Date Imaged					
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / SU	JITE#; CFTY; STATE;	ZIP CODE					
TREASURER ADDRESS	100 Congress							
(Residence or business)	Ste. 800 Austin TX 78701							
	Adstin 1X 70701							
7 CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION						
TREASURER PHONE	() -							
. DEPODE TUBE								
8 REPORT TYPE	X January 15 30th day before election	Runoff	15th day after campaign treasurer appointment (officeholder only)					
	July 15 Sth day before election	Exceeded \$500 limit	Final report (Attach C/OH - FR)					
9 PERIOD	Month / Day / Year	Month / Day	/ Year					
COVERED	10/27/2002	02						
10 ELECTION	ELECTION DATE ELECTION TO Month / Day / Year	YPE	_					
	Primar	y Runoff X	General Special					
<u></u>	11/05/2002	12 OFFICE SOUGHT (if know	m)					
11 OFFICE	OFFICE HELD (if any) Other Judge, County Court at Law #7	District Judge 403	··,					
13 NOTICE OF DIRECT	Direct campaign expenditures are campaign ex	penditures made by others without the	candidate's prior consent or approval.					
CAMPAIGN	Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure.							
EXPENDITURE BY OTHER	Name							
INDIVIDUALS								
	Address/PO Box; Apt. / Suite #; City; State;	Zip Code						
	Audiessing Dox. Apr. / Suite #, Oily, State,							
additional pages								
	GO TO	PAGE 2						
I								

Texas Ethics Commission

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

			<u> </u>			
14 C/OH NAME Hon. Brenda Kenned	dy		15 ACCOUNT # (Ethics Commission filers) 00051821			
16 NOTICE FROM	have been made with	les political expenditures by political committees to support the can tout the candidate's or officeholder's knowledge or consent. Candida by receive notice of such expenditures	didate / officeholder. These expenditures may tes and officeholders are required to report this			
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME				
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS				
		: 				
17 CONTRIBUTION TOTALS	1. TOTAL PLEDGE	\$ 257.96				
	2. TOTAL (OTHER	\$ 1657.96				
	3. TOTAL	\$ 624.78				
EXPENDITURE TOTALS	4. TOTAL	\$ 4598.24				
OUTSTANDING LOAN TOTALS	5. TOTAL I	\$ 0.00				
CONTRIBUTION BALANCE	6. TOTAL I	\$ 9963.72				
18 AFFIDAVIT						
			of perjury, that the accompanying report all information required to be reported by e.			
N A	MARA M. 1030	ct loss: 1) Brenda t	Mennedy (Sennedy)			
A management of the second	My Contraction to the My October 1		andidate or Officeholder			
Ruby	W. Jones	come the this	K			
Muna^	6 EL 1		- aa i			
	0					

POLITICAL CONTRIBUTIONS

Austin, Texas 78711-2070

SCHEDULE A (J)

1-800-325-8506

O 111	THAN PLEDGES OR LOANS					
The INSTRUCT	The Instruction Quide explains how to complete this form.		1 Total pages report:			
2 FILER NAME	================================			3 ACCOUNT# (E	thics Commission filers)	
Hon, Brend	a Kennedv			00051821		
4 Date	5 Full name of contributor ut-of-state PAC)(ID#)	7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)	
	Mr. James Adkins			Į	ł I	
11/04/2002	6 Contributor address; City; State; Zip Code 3904 Austin Woods Drive			150.00	 	
	Austin TX 78759				<u>.</u>	
'	principal occupation	1	Contributor's job	title		
Attorney 11 Contributor's	emplover/law firm		Attorney Law firm of contr	ributor's spouse (if ar	ny)	
Self Employ				•		
	is a child, law firm of parent(s) (if any)					
Date	Full name of contributor out-of-state PAC	(ID#)	Amount of	In-kind contribution	
	Mr. Ben Florey			contribution (\$)	description(if applicable)	
11/04/2002	Contributor address; City; State; Zip Code 3612 Ripple Creek Drive			250.00	 	
	Austin TX 78701				<u> </u>	
	principal occupation	1	Contributor's job attorney	title		
attorney Contributor's	employer/law firm			ributor's spouse (if ar	ny)	
Florey,Keel,	& Nassour					
If contributor i	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor ut-of-state PAC((ID#	.)	Amount of contribution (\$)	In-kind contribution description(if applicable)	
11/04/2002	Contributor address; City; State; Zip Code			500.00	 -	
	812 San Antonio Ste. 103 Austin TX 78701		,	!	1	
Contributor's p	principal occupation	1	Contributor's job attorney	title	, 	
Contributor's	employer/law firm			ibutor's spouse (if an	ıy)	
Self Employe		<u> </u>				
If contributor is	s a child, law firm of parent(s) (if any)					
			1			
			•			

POLITICAL CONTRIBUTIONS THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

(512)463-5800

OTHER THAN PLEDGES OR LOANS (SODICIAL)							
-	The INSTRUCTION QUIDE explains how to complete this form.		1 Total pages report: 4/8				
2	2 FILER NAME			3 ACCOUNT# (Et	hics Commission filers)		
	Hon. Brenda				00051821		
4	Date	5 Full name of contributor ut-of-state PAC(I	ID#)	7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)	
	10/30/2002	Mr. Thad Son 6 Contributor address; City; State; Zip Code 104 Cold Water Lane Austin TX 78734			500.00		
9	Contributor's p	nincipal occupation	10	-	title		
	self-employe	d	12	attorney.	ributor's spouse (if a	nv)	
11	self employe	employer/law firm	12	Law min or conc	Appeado (ii ai		
13		s a child, law firm of parent(s) (if any)		****			

SCHEDULE F

(512)463-5800

POLITIC	CAL DITURES			SCHEDULE P		
The Instruction Guide explains how to complete this form.			1 Total pages re 5/8	report:		
2 FILER NAME			, 3 ACCOUNT # (Ethics Commis			
Hon. Brend	a Kennedy		00051821			
4 Date	5 Payee name			7 Amount (\$)		
11/04/2002	Best Buy 6 Payee address; City; State; Zip Code			70.34		
	Mopac at 290					
	Austin TX 78735					
8 Purpose of exp information red Ink Cartridge		9 Complete if direct expen Candidate / Officeholder na	iditure to benefit C/ ime Office sou	OH •• ught Office held		
Date	Payee name			Amount (\$)		
12/06/2002	CitiCard Payee address; City; State; Zip Code P.O. Box 6000			2110.77		
	The Lakes NV 89163					
information red	penditure (See instructions regarding type of quired.) Office Chair plus extended warranty (Sharper	·· Complete if direct expen Candidate / Officeholder na				
Date	Payee name			Amount (\$)		
11/05/2002	Doubletree Hotel Payee address; City; State; Zip Code 15th and Lavaca Austin TX 78701	· · · · · · · · · · · · · · · · · · ·		198.57		
information red	penditure (See instructions regarding type of quired.) It Watch/Celebration Suite Rental	Complete if direct expen Candidate / Officeholder na				
Date	Payee name			Amount (\$)		
11/05/2002	HEB Payee address; City; State; Zip Code Brodie Lane			157.82		
	Austin TX 78734					
information red	Denditure (See instructions regarding type of	Complete if direct expen Candidate / Officeholder na	diture to benefit C/ ime Office sou			

Texas Ethics Commission

SCHEDULE F

EXPEN	DITURES					
The Instruction Guide explains how to complete this form.			1 Total pages report: 6/8			
2 FILER NAME		,	3 ACCOUNT#	(Ethics Commission filers)		
Hon. Brenda	a Kennedy		00051821			
4 Date	5 Payee name			7 Amount (\$)		
11/04/2002	6 Payee address; City; State; Zip Code			584.60		
	2303 CR 172 Round Rock TX 78681					
8 Purpose of exp	penditure (See instructions regarding type of	9 Complete if direct exper	nditure to benefit C	юн		
information red		Candidate / Öfficeholder na	àme Office soi	ught Office held		
Date	Payee name			Amount (\$)		
12/16/2002	Target Payee address; City; State; Zip Code			71.46		
	5300 South Mopac					
	Austin TX 78735					
Purpose of exp information red Office Staff X		Complete if direct exper Candidate / Officeholder na	nditure to benefit Ca ame Office son			
Date	Payee name			Amount (\$)		
11/30/2002	The Sharper Image Payee address; City, State, Zip Code			110.23		
	10000 Research Blvd.	, 8				
	Austin TX 73301					
Purpose of exp information red Campaign Vo	•	Complete if direct exper Candidate / Officeholder na				
Date	Payee name			Amount (\$)		
10/28/2002	Travis County Democratic Party - East Office Payee address; City; State; Zip Code			100.00		
	3724 Airport Blvd.	•				
	Austin TX 78723					
Purpose of exp information req BBQ - Ron K		Complete if direct exper Candidate / Officeholder na				
		,				

Date

12/05/2002

information required.)

campaign cell phone expense

Payee name

Verizon Wireless

P.O. Box 773600

Purpose of expenditure (See instructions regarding type of

Houston TX 77215

City: State; Zip Code

Payee address;

(512)463-5800 1-800-325-8506 P.O. Box 12070 Austin, Texas 78711-2070 **Texas Ethics Commission** SCHEDULE F POLITICAL **EXPENDITURES** 1 Total pages report: The Instruction Guide explains how to complete this form. 7/8 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME 00051821 Hon. Brenda Kennedy Amount Date 5 Payee name (\$) 11/04/2002 Travis County Democratic Party - East Office 100.00 City; State; Zip Code 6 Payee address; 3724 Airport Blvd. Austin TX 78723 · · Complete if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Purpose of expenditure (See instructions regarding type of Office held information required.) Office Supply & Personnel Contribution Date Payee name Amount (\$) 11/05/2002 Ms. Gerry Tucker 106.00 City; State; Zip Code Payee address; 3202 Hyclimb Circle Austin TX 78723 · · Complete if direct expenditure to benefit C/OH · · · Purpose of expenditure (See instructions regarding type of information required.) Candidate / Officeholder name Office sought Office held Election night catering Amount Payee name Date (\$) 11/04/2002 Verizon Wireless 212.48 City: State: Zip Code Payee address; P.O. Box 773600 Houston TX 77215 Purpose of expenditure (See instructions regarding type of information required.) -- Complete if direct expenditure to benefit C/OH --Candidate / Officeholder name Office held Campaign Cellular phone expense

Amount (\$)

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought

151.19

Office held

Texas Ethics Comm	nission P.O. Box 12070 Austin, Texas 78711-2070		(512)463	3-5800	1-800-	325-85
CREDI [*]	TS (optional)			SCHE	DULE	K
The Instruction	ON GUIDE explains how to complete this form.	1 Tota	l pages report:			
2 FILER NAME	Ξ ,		COUNT # (Ethics	Commission file	ers)	
Hon. Brend	a Kennedy	000	051821			
4 Date 10/28/2002	5 Payor name Karen Sonleitner Campaign on behalf of the Austin Women's Political 6 Payor address; City; State; Zip Code P.O. Box 26524 Austin TX 78756 7 Reason for credit Refund of overpayment for campaign flyers sponsored by AWPC				nount (\$) 218.25	
	:					